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# CALIFORNIA STATE BOARD OF HEALTH

## Weekly Bulletin



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GUY P. JONES  
EDITOR

### Learn Now How to Revive Drowning Person.

If every vacationist knew how to revive a drowning person many lives could be saved. The "prone pressure" method is simple, easily learned, and requires no apparatus. It can be used, also, for stimulating artificial respiration after suffocation from gas, shock from electricity and other accidents.

One of the methods that has been taught for many years is the "Sylvester" method in which the patient is placed upon his back and his arms swung alternately above his head and down across his chest. This method has proven unsatisfactory as it not only quickly tires the person applying the method but it is also unsuccessful in filling the patient's lungs with air. Late investigations have resulted in the universal adoption of the "prone pressure" method, which can be used continuously for many hours, by almost anyone, without tiring him excessively.

Practice in the application of this method is necessary and it is suggested that persons who contemplate spending their vacations near the water practice this method of resuscitation upon a living subject. More than the mere reading of the directions is required. Practice is necessary.

Following is a full description of the "prone pressure" method of resuscitation:

First, examine the victim's mouth and throat with your finger and remove any

foreign body (tobacco, false teeth, etc.). Do not stop to loosen person's clothing, but immediately begin actual resuscitation. *Every moment of delay is serious.* Proceed as follows:

Lay the patient on his stomach, both arms extended overhead. Turn face to one side so that nose and mouth are free for breathing. Kneel, straddling the patient's hips; place the palms of your hands on the small of the back, little finger just touching the last rib—tips of fingers just out of your sight. On counting one, two, with the arms held straight, swing forward slowly so that the weight of your body is gradually but not violently brought to bear upon the patient. This action takes from two to three seconds.

#### The Swing Motion.

While counting three, immediately swing backward so as to remove the pressure, returning to the upright position. Hands should not be removed from patient while removing pressure. While counting four and five, rest. Repeat deliberately twelve to fifteen times a minute, the swinging forward and back—complete respiration in four or five seconds. Time by your own breathing.

As soon as this artificial respiration has been started, and while it is being continued, an assistant, if one is present, should loosen any tight clothing about the patient's neck, chest, or waist. Keep the patient warm by covering the limbs with blankets or by rubbing them gently. Continue respiration (if necessary, four



hours or longer) without interruption, until natural breathing is restored or until a physician declares rigor mortis (stiffening of the body) has set in. If natural breathing stops after being restored, use resuscitation again.

#### Keep Patient Warm.

Do not give any liquid by mouth until the patient is fully conscious. Place ammonia near the nose, determining a safe distance by first trying how near it may be held to your own. Assistant should hit patient's shoe heels a few times with a stick and repeat this operation every five minutes until breathing commences. Give the patient fresh air but keep him warm. When patient revives, keep him lying down and do not raise him. Carry on resuscitation at closest possible point to the accident. Do not move patient until he is breathing normally, without assistance. If absolutely necessary to move, he should be placed on a hard surface, such as a door or floor of conveyance. Do not stop and interrupt resuscitation for an instant.

If alone with the victim, do not neglect immediate and continued resuscitation in order to call a doctor; *start at once*; the first few minutes are valuable. If other persons are present, send one of them for a doctor without a moment's delay.



The provision of proper instruction in physiology and hygiene, and the inculcation of health habits and physical training for the pupils in elementary and secondary schools and for students in the universities, and the thorough training of pupils in the normal schools (those who expect to be teachers) in these subjects and in the fundamental biological sciences so that they will be qualified to teach, constitutes, in my judgment, the second important health objective in the coming years. It is difficult to over-estimate the importance of the acquirement in childhood and early life of health habits, and of an interest in and a knowledge of the influence of foods, diet, baths, rest and exercise, sleep, the care of the teeth, the methods of prevention of the infectious diseases, and the general care of the body in health and disease.

The alteration of the habits of life after maturity is always a difficult process and usually only comes about because of apprehension caused by the presence of illness or the beginning loss of physical or mental power and endurance. The people of the United States are becoming more and more alive to the joys and the benefits which accrue from the pursuit of outdoor sports and an outdoor life. The sporting pages of the daily papers furnish abundant testimony to this fact. Unfortunately, like all good things, excessive indulgence in sports may be harmful, and their pursuit also needs intelligent direction. This change in the habits of life, which is becoming nation-wide, is undoubtedly adding to our national physical efficiency at a rapid and increasing rate.—Hermann M. Biggs, M.D., Health Commissioner, New York State.

### Governor Signs Welfare Measure.

Governor Richardson has signed the bill introduced by Assemblyman Weller of Los Angeles, the provisions of which enable California to participate in the acceptance of federal funds, under the Sheppard-Towner law, to be used in infant and maternal welfare work. California is the thirty-sixth state to accept federal government funds for carrying on this important work. The women of California, as represented in organizations of women's clubs, were unanimous in their support of this measure.



#### PREVENTIVE NURSING.

A new school of nursing recently established at Yale University and maintained by funds from the Rockefeller Foundation, presents two striking changes from the usual nurses' course. The period of training is to be shortened and the course is to include public health and community work as well as bedside nursing.

In order to shorten the period of training without weakening the course, the basis of work on hospital wards will be shifted from the labor needs of the hospital—cleaning, bed-making, etc.—to the educational requirements of the pupil nurse. She will learn to do those manual things, of course, but all such service will follow a definite program of teaching and practice more closely than at present.

The recognition of the nurse's relation to public health and community problems is an advance in nursing ideals. Curative and preventive medicine now work side by side for the good of individual patients and for their fellow-citizens.

The doctors and nurses are not working themselves out of jobs but are changing their work to emphasize disease prevention. They are devoted and competent to care for the sick, but they would rather use their knowledge to keep people well in the first place.—Richmond Independent.

An unchivalrous judge, on complaints filed by equally unchivalrous health officers, fined two girl hikers for bathing their pretty feet in Marin county's water supply, showing how far we have travelled from those romantic days when men would drink out of a lady's slipper, either because the wine was good or the lady just too charming for anything.—Watsonville Register.

#### THE WISDOM OF THE EAST.

An Arab proverb runs as follows:  
"The world is supported by four columns:  
The justice of the great  
The prayer of the righteous  
The bravery of the valiant, and  
The science of the physician."  
—Hygeia.

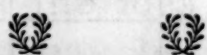
#### TREATMENT OF PARESIS.

Certain German investigators, having observed that patients with paresis tended to improve when they became ill with malaria, have been treating paresis by injecting malaria into the blood. The method is still under investigation in this country as well as in Europe and its effects can not be stated with certainty, but there is some prospect that they may prove of value.—Hygeia.



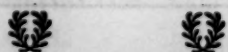
## Conference on Maternal and Child Welfare.

A conference on maternal and child welfare, under the auspices of the Bureau of Child Hygiene of the California State Board of Health, will be held in the auditorium of Stanford University Medical School, San Francisco, July 16th to 21st. Among the speakers will be Miss Marie Phelan, R.N., Supervising Public Health Nurse of the Children's Bureau, Washington, D. C.; Dr. Wm. Palmer Lucas, Professor of Pediatrics, University of California Medical School, San Francisco; Dr. Adelaide Brown, member State Board of Health, Lecturer, Stanford University Medical School, San Francisco; Dr. Alvin Powell, Director, Alameda County Public Health Center, Oakland; Miss Mary L. Cole, Director Nursing Service, Pacific Division, American Red Cross, San Francisco; Dr. Alfred B. Spalding, Professor of Obstetrics and Gynecology, Stanford University Medical School, San Francisco; Miss Marguerite A. Wales, Director of Social Service, The Stanford Clinics, San Francisco. The complete program will be announced at an early date. Persons who desire to attend this conference should write to the Bureau of Child Hygiene, 722 Wells-Fargo Building, San Francisco, for application blanks.



## Nurses Registering for Southern Institute.

Registration for the institute for public health nurses, to be held in Los Angeles, July 23d to August 4th, is progressing rapidly. It is necessary for all nurses who desire to attend the institute to make early application in order to be certain that there will be adequate provision for the accommodation of the large attendance. The program is about completed and will be published in an early issue of the bulletin. Nurses who desire to attend should write to the State Board of Health, Sacramento, for application blanks.



All noble sentiments lie dormant in the depths of human nature, but each one has a chord, in unison with which it is ready to vibrate. At the sound of the trumpet or at the cry of the country in danger, martial courage springs up in men's breasts. On the other hand, at the weakest cry of a suffering child, or at the least tale of suffering, especially if undeserved, charity arises, ready with gifts and with blessings.—Pasteur.

## MORBIDITY.\*

### Diphtheria.

142 cases of diphtheria have been reported, as follows: Alameda County 6, San Francisco 29, Oakland 9, Los Angeles County 8, Los Angeles 45, Berkeley 6, San Fernando 1, Sonoma 1, Sacramento County 1, Tulare County 1, Stockton 1, Contra Costa County 1, Yolo County 1, Stanislaus County 1, Bakersfield 4, Fresno County 2, Redlands 1, Modesto 1, Long Beach 3, San Mateo 3, Alhambra 1, Pittsburg 1, Santa Paula 2, Ventura County 1, Glendale 1, Orange County 1, Daly City 1, Stockton 1, Santa Rosa 2, Richmond 1, San Joaquin County 2, San Luis Obispo County 1, Merced County 1, Dixon 1.

### Measles.

960 cases of measles have been reported, as follows: Albany 7, San Mateo 15, San Francisco 105, Livermore 6, Chico 7, San Joaquin County 47, Santa Clara 13, Pasadena 18, Palo Alto 11, Solano County 6, Petaluma 5, Richmond 5, Santa Ana 7, Torrance 5, Dinuba 12, Lodi 45, Berkeley 51, Orange County 11, Glendale 8, Manteca 7, Redwood City 7, Long Beach 12, Los Angeles County 38, Los Angeles 164, Alameda County 33, Pleasanton 6, San Gabriel 12, El Segundo 6, Alameda 47, Sacramento 63, Oakland 88, Stockton 4, Contra Costa County 5, Pomona 1, Nevada County 2, Kern County 3, Watsonville 2, Alhambra 2, Whittier 3, San Bernardino County 3, Burbank 4, Humboldt County 1, Santa Maria 8, La Mesa 1, San Rafael 1, Modoc County 4, East San Diego 1, Rialto 1, Colusa 2, Sutter County 1, Fresno County 1, Napa 2, Gilroy 4, Fullerton 2, Calistoga 1, Vacaville 3, Tulare County 4, San Diego County 2, Modesto 1, Santa Monica 1, Huntington Park 2, San Luis Obispo County 1, Merced County 2, Pittsburg 4, Turlock 1, Los Gatos 1, Vernon 1, Fresno 4, Pacific Grove 1, Santa Paula 1, Claremont 1, Ontario 2, Grass Valley 2.

### Scarlet Fever.

146 cases of scarlet fever have been reported as follows: San Francisco 18, Pomona 5, Oakland 5, Sacramento 8, Pasadena 10, Los Angeles County 7, Los Angeles 37, San Joaquin County 5, Riverside 4, Humboldt County 1, Vallejo 1, San Rafael 4, San Bernardino County 2, Albany 2, Alameda 2, Long Beach 3, Modesto 1, Contra Costa County 1, Santa Clara County 1, Fresno County 3, Hawthorne 2, Santa Cruz County 1, San Fernando 2, Tulare



County 1, Sebastopol 1, Berkeley 4, Stockton 1, San Benito County 1, Fresno 3, Orange County 1, Alameda County 3, Alhambra 3, Chico 2, Glendale 1.

#### Whooping Cough.

135 cases of whooping cough have been reported, as follows: Riverside 9, Pasadena 11, Merced County 6, Long Beach 7, San Francisco 13, San Joaquin County 7, Sacramento 7, Los Angeles County 23, Los Angeles 14, Banning 2, Santa Monica 1, Santa Clara County 3, Fresno County 1, Napa County 2, Napa 1, Palo Alto 3, Chula Vista 3, Glendale 4, Santa Cruz County 2, San Gabriel 1, Berkeley 2, Mill Valley 3, Venice 1, Redwood City 3, Oakland 3, Tulare County 1, Nevada County 2.

#### Smallpox.

36 cases of smallpox have been reported, as follows: Los Angeles County 2, Los Angeles 16, Fresno 1, Santa

Cruz County 2, Pomona 1, Ventura County 3, Kern County 2, San Joaquin County 1, Alameda County 1, Santa Clara County 4, San Bernardino County 3.

#### Typhoid Fever.

6 cases of typhoid have been reported, as follows: Los Angeles County 2, Rio Vista 1, Long Beach 1, San Francisco 2.

#### Epidemic Encephalitis.

Los Angeles and San Francisco each reported one case of epidemic encephalitis.

#### Leprosy.

Oakland reported one case of leprosy.

#### Poliomyelitis.

San Bernardino County reported one case of poliomyelitis.

\*From reports received May 28th and 29th for week ending May 26th.

### COMMUNICABLE DISEASE REPORTS.

Disease	1923				1922			
	Week ending			Reports for week ending May 26 received by May 29	Week ending			Reports for week ending May 27 received by May 31
	May 5	May 12	May 19		May 6	May 13	May 20	
Anthrax.....	1	0	0	0	0	0	0	0
Cerebrospinal Meningitis.....	4	2	1	0	4	3	1	2
Chickenpox.....	272	295	331	228	132	163	164	154
Diphtheria.....	167	154	167	142	119	126	118	110
Dysentery (Bacillary).....	1	0	1	2	5	1	0	0
Epidemic Encephalitis.....	2	1	1	2	5	5	2	4
Gonorrhoea.....	106	94	113	69	109	95	60	52
Influenza.....	461	64	18	32	70	34	21	21
Leprosy.....	3	1	0	1	1	2	0	0
Malaria.....	5	4	3	3	4	2	4	0
Measles.....	1268	1418	1402	960	15	47	33	42
Mumps.....	24	36	34	34	72	45	74	51
Pneumonia.....	59	67	62	43	176	63	77	57
Poliomyelitis.....	0	0	3	1	0	0	2	0
Scarlet Fever.....	173	202	171	146	91	143	130	105
Smallpox.....	43	29	43	36	34	37	38	30
Syphilis.....	77	180	147	74	99	133	113	70
Tuberculosis.....	136	190	143	145	141	157	206	147
Typhoid Fever.....	18	21	12	6	11	9	22	9
Whooping Cough.....	257	298	222	135	114	103	98	74
Totals.....	3077	3056	2874	2059	1202	1168	1163	928